

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/16/04, OAKS

FILING DATE

6-22-04 10-15-07 3-14-08

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3	1					
4	1		1		1	
5		1				
6	15					
7	1		1		1	
8	1					
9	1		1		1	
10	1					
11	1		1		1	
12	1					
13			1		1	
14	1					
15	1		1		1	
16	1		1		1	
17	1		1		1	
18			1		1	
19						
20						
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47						
48						
49						
50	1					
TOTAL IND.	8	2	2	2		
TOTAL DEP.	12	2	2	2		
TOTAL CLAIMS	10	9	9	8		

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
51								
52								
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100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS